



RECEIVED
CENTRAL FAX CENTER
APR 20 2007

DLA Piper US LLP
2000 University Avenue
East Palo Alto, California 94303-2215
www.dlapiper.com

Timothy W. Lohse
timothy.lohse@dlapiper.com
T 650.833.2055
F 650.833.2001

FAX TRANSMISSION COVER SHEET**April 20, 2007**To:Telephone:Fax Number:

Examiner Lalita M. Hamilton
Commissioner for Patents
P.O. Box 1450
Alexandria, VA 22313-1450

(571) 272-6743

(571) 273-8300

From: Timothy W. Lohse *TWL*
Reg. No. 35,255
Tel: 650-833-2055

Client-Matter Number: 361916-991100

Re: U.S. Serial No.: 09/721,728

Pages: - 15 - (including this form)

Originals: ☐ will be mailed ☒ will not be mailed

If there is a problem with this transmission, please call (650) 833-2265

Message:

Commissioner for Patents
P.O. Box 1450
Alexandria, VA 22313-1450

Transmitted via Fax on: April 20, 2007
Attorney Docket No. 3561916-991100
U.S. Serial No.: 09/721,728
Filing Date: November 25, 2000
Title: **PROCESS AND DEVICE FOR CONDUCTING ELECTRONIC TRANSACTIONS**

Enclosed is: 1) Fee Transmittal for FY 2007;
2) Petition for Extension of Time (1 Pg.) (+1 copy); and
3) Response C (11 pgs.).

Certificate of Transmission by Facsimile

I hereby certify that this correspondence is being transmitted
by facsimile to Fax No. (571) 273-8300 to:
Commissioner for Patents, Alexandria, VA 22313-1450 on:
April 20, 2007

Rosa A. Caviedes
Rosa A. Caviedes

CONFIDENTIALITY NOTICE

This communication is ONLY for the person named above. Unless otherwise indicated, it contains information that is confidential, privileged or exempt from disclosure under applicable law. If you are not the person named above, or responsible for delivering it to that person, be aware that disclosure, copying, distribution or use of this communication is strictly PROHIBITED. If you have received it in error, or are uncertain as to its proper handling, please immediately notify us by collect telephone and mail the original to us at the above address. Thank you.

(Form Rev. 6/5/00)

Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number.

Effective on 12/09/2004. Fees pursuant to the Consolidated Appropriations Act, 2005 (H.R. 4818). <h1 style="text-align: center;">FEE TRANSMITTAL</h1> <h2 style="text-align: center;">For FY 2007</h2>		Complete If Known	
<input checked="" type="checkbox"/> Applicant claims small entity status. See 37 CFR 1.27		Application Number	09/721,728
		Filing Date	November 25, 2000
		First Named Inventor	Rani K. Yadav-Ranjan
		Examiner Name	Lalita M. Hamilton
		Art Unit	3624
TOTAL AMOUNT OF PAYMENT (\$)\$225.00		Attorney Docket No.	361916-991100

RECEIVED
CENTRAL FAX CENTER
APR 20 2007

METHOD OF PAYMENT (check all that apply)

☐ Check
 ☐ Credit Card
 ☐ Money Order
 ☐ None
 ☐ Other (please identify): _____

☒ Deposit Account
 Deposit Account Number: 07-1896
 Deposit Account Name: DLA Piper US LLP

For the above-identified deposit account, the Director is hereby authorized to: (check all that apply)

☒ Charge fee(s) indicated below
 ☐ Charge fee(s) indicated below, except for the filing fee
☒ Charge any additional fee(s) or underpayments of fee(s) under 37 CFR 1.16 and 1.17
 ☒ Credit any overpayments

WARNING: Information on this form may become public. Credit card information should not be included on this form. Provide credit card information and authorization on PTO-2038.

FEE CALCULATION

1. BASIC FILING, SEARCH, AND EXAMINATION FEES

Application Type	FILING FEES		SEARCH FEES		EXAMINATION FEES		Fees Paid (\$)
	Fee (\$)	Small Entity Fee (\$)	Fee (\$)	Small Entity Fee (\$)	Fee (\$)	Small Entity Fee (\$)	
Utility	300	150	500	250	200	100	
Design	200	100	100	50	130	65	
Plant	200	100	300	150	160	80	
Reissue	300	150	500	250	600	300	
Provisional	200	100	0	0	0	0	

2. EXCESS CLAIM FEES

Fee Description	Small Entity Fee (\$)	Fee (\$)
Each claim over 20 (including Reissues)	50	25
Each independent claim over 3 (including Reissues)	200	100
Multiple dependent claims	360	180

Total Claims - 20 or HP = _____ x _____ = _____
 HP = highest number of total claims paid for, if greater than 20
Indep. Claims - 3 or HP = _____ x _____ = _____
 HP = highest number of independent claims paid for, if greater than 3

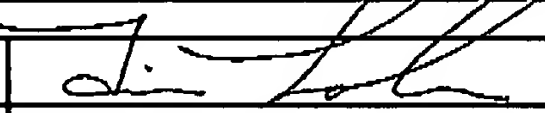
3. APPLICATION SIZE FEE

If the specification and drawings exceed 100 sheets of paper (excluding electronically filed sequence or computer listings under 37 CFR 1.52(e)), the application size fee due is \$250 (\$125 for small entity) for each additional 50 sheets or fraction thereof. See 35 U.S.C. 41(a)(1)(G) and 37 CFR 1.16(s).

Total Sheets	Extra Sheets	Number of each additional 50 or fraction thereof	Fee (\$)	Fee Paid (\$)
- 100 = _____	/50= _____	(round up to a whole number) x _____		

4. OTHER FEE(S)

Description	Fee Paid (\$)
Non-English Specification, \$130 fee (no small entity discount)	
Other (e.g., late filing surcharge): Petition for Extension of Time - Small Entity [2 Months]	\$225

SUBMITTED BY		Registration No. 35,255	Telephone (650) 833-2055
Signature		(Attorney/Agent)	
Name (Print/Type)	Timothy W. Lohse	Date	April 20, 2007

This collection of information is required by 37 CFR 1.136. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 30 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

AmericanLegalNet, Inc.
orkflow.com